## Bankruptcy2012@1991-2012, New Hope Software, Inc., ver. 4.6.7-779 - 32611-301X-\*\*\*\* - PDF-XChange 3.0

## UNITED STATES BANKRUPTCY COURT Northern District of California

In re	Manuel Torres		Cox	nga Ma	12-56569
		Debtor	Cas	ise No	12 3 03 0 )
			Cha	napter _	11

## LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

Following is the list of the debtor's creditors holding the 20 largest unsecured claims. The list is prepared in accordance with Fed. R. Bankr. P. 1007(d) for filing in this chapter 11 [or chapter 9] case. The list does not include (1) persons who come within the definition of "insider" set forth in 11 U.S.C.\s 101, or (2) secured creditors unless the value of the collateral is such that the unsecured deficiency places the creditor among the holders of the 20 largest unsecured claims. If a minor child is one of the creditors holding the 20 largest unsecured claims, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C.\s 112 and Fed. R. Bankr. P. 1007(m).

(1)  Name of creditor  and complete  mailing address  including zip code	(2) Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted	(3) Nature of claim (trade debt, bank loan, government contract, etc.	(4) Indicate if claim is contingent, unliquidated, disputed or subject to setoff	(5) Amount of claim [if secured also state value of security]
Target Po BOX 660170 Dallas, TX 75266		Credit Card		150
Capital One PO BOX 60599 City of Industry, CA 91716		Credit Card		192
JCPenny PO BOX 960090 Orlando, Fl 32896		Credit Card		201
Chase PO BOX 659754 San Antonio, TX 78265		Credit Card		300

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	Bankruptcy2012©19	( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )

(1) Name of creditor	(2) Name, telephone number and	(3) Nature of claim	(4) Indicate if	(5) Amount of claim
and complete mailing address including zip code	complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted	(trade debt, bank loan, government contract, etc.	claim is contingent, unliquidated, disputed or subject to setoff	[if secured also state value of security
Pulmonary Specialist Group of nevada PO BOX 504192 St Louis, MO 63150		Medical		400
Medic West Ambulance In Po BOX 3429 Modesto, Ca 95353		Medical		1,004
United Critical Care 1801 W Olympic Blvd File 1270 Pasadena, Ca 91199		Medical		1,197
Fremont emergency services 9301 S western ave Oklahoma, City, OK 73139		Medical		1,309
Bar harbor & Newport Cove Po BOX 348600 Sacramento, CA 95834		Credit Card		2,117
Best Buy Po BOX 49353 San Jose, CA 95161		Credit Card		2,802
Client Services c/o Wells Fargo Bank 3451 Harry S Truman Blvd St Charles, MO 63301		Credit Card		2,899
TLThompson & assoc c/o State Farm PO BOX 496149 Garland, TX 75049		Insurance		3,993

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(1) (2) (3) (4) (5) Name of creditor Name, telephone number and Nature of claim Indicate if Amount of claim complete mailing address, (trade debt, bank and complete claim is [if secured also  $contingent,\,unliquidated,$ mailing address including zip code, of employee, loan, government state value of security] including zip code agent, or department of creditor contract, etc. disputed or familiar with claim who may be contacted subject to setoff

Credit Card

8,430

Sunrisse Credit services c/o Bank of america Card Po BOX 9100 Farmingdale, NY 11735

## DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing list of twenty largest unsecured creditors and that it is true and correct to the best of my knowledge, information and belief.

Date	9/5/2012	Signature	/s/ Manuel Torres	
			MANUEL TORRES	

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